Virginia's Turning Point Initiative

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Why Turning Point?

- Public health infrastructure is crumbling
 - Lack of continuity in leadership at state/nation
 - Less than 3% of health care expenditures devoted to prevention
 - Limited access to data in understandable format that is comparable across states
 - General public and decision-makers take our achievements for granted (increase in life span)
 - · Need to address public health role in the safety net
 - New skills needed for public health workforce

Why Turning Point?

- Greater emphasis needed on education about the lifestyle factors that contribute to the majority of deaths in the 1990's
 - 70% are related to lifestyle, 20% are due to environmental and genetic factors, and 10% are due to lack of access
 - Virginia has a higher burden of chronic disease that the national average
 - Estimated that 3/4 of health care costs are for chronic diseases



- ◆New voices needed for public health to become more visible influential
 - The community sees public health as immunizations and indigent health care
 - Public does not understand core functions of assessment, policy development and assurance
 - Public health agencies are often not the most effective advocates
 - Use community leaders as advocates for strengthening the public health system

Why Turning Point Now?

- Market-driven changes in health care
- Changing role of government
- Consumers are demanding accountability
- Policy-makers expect intersectoral collaboration
- Shifting expectations and responsibility

Virginia's Initiative

- Statewide initiative with three local partnerships: the New Century Council, Norfolk, and Prince William
 - Vision: improve the health of communities
- Year one: Community Outreach
- Year two: Analysis of options

Four Goal Areas

- Obtain community input on future roles and responsibilities for public health
- Improve elected officials understanding and value for public health
- Increase communities capacity to assess health needs
- Ensure workforce training of skills needed to successfully carryout future roles

- Community Outreach
 - Completed a random sample telephone survey of 800 households
 - Held focus group discussions with community leaders around the state
 - Regional Forums provide the community an opportunity to be heard
 - Consumer survey of clinic and environmental health programs underway

- Telephone Survey
 - 1994: 50% of Virginians could not name a service provided by LHDs
 - 1998: 35% of Virginians could not name a service provided by LHDs
 - Those that could overwhelmingly indicated immunization as the primary activity of public health

- Telephone Survey
 - Virginians define public health as the "Health of the Community"
 - Pollution cited as the primary health concern and also as the major reason health had declined. Cancer another critical concern
 - Ensuring safe drinking water received the highest rating as a "Very important" activity

- Focus Groups
 - Community education on health issues was the consensus for the top priority of public health in the future
 - Participants felt the health department should play a role in assuring primary health care services but not necessarily providing them
 - The collection of health information is cumbersome with few usable products

- Regional Forums
 - Participants represented public health partners and other interest groups
 - Turning Point cannot lose sight of "traditional public health functions" communicable disease control and environmental health during this strategic planning process

- Interim Report distributed
 - 500 Copies of the Full Text
 - 2500 Copies of the Promotional Piece
 - Available on the Turning Point Web Site
- Future Scenario Planning Completed
- Internal Assessment Underway

- Key Issues
 - Health education, communication, public awareness
 - Access to Health Care Services
 - Communicable Disease Control
 - Environmental Health Protection
 - Health Information

- Next Steps
 - Workgroups will focus on key areas over the course of the summer and develop a "white paper" with specific strategies to move public health forward
 - Work with 3M group to draw a closer link between medicine and public health
 - Steering Committee will analyze information and submit recommendations to the Governor and General Assembly

Where Do We Go From Here?

- Influence on current strategic plan
- Robert Wood Johnson site visit
- Legislative or Study Commission

Where Do We Go From Here?

- Review of public health laws
- Health economics of prevention
- Social marketing education campaign
- Workforce development issues
- Public health institute or authority
- Explore public health's focus: the individual or the community

Conclusion

- Two years is not much time; there is still work to be doneCommunity engagement was critical as
- a first step in this process of strengthening public health
 - Market forces are in our favor
 - Success will depend on involvement from the private sector and the community